



3731/4

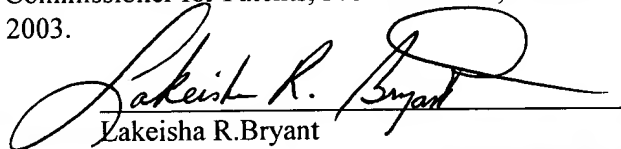
PATENT
Attorney Docket No. BSC-035CN

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Gellman et al. CONFIRMATION NO. 9128
SERIAL NO.: 09/579,909 GROUP NO.: 3731
FILING DATE: May 26, 2000 EXAMINER: U. Ho
TITLE: Bone Anchors for Bone Anchor Implantation Device

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 9th day of June, 2003.


Lakeisha R. Bryant

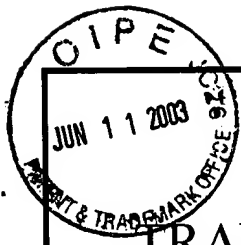
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Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. Second Supplemental Information Disclosure Statement (2 pgs.);
4. Form PTO-1449 (1 pg.), with copies of cited references A175-A177;
5. Check in the amount of \$180.00;
6. Return Receipt Postcard; and this
7. Certificate of First Class Mailing (1 pg.).



TRANSMITTAL FORM

Application Serial Number	09/579,909
Filing Date	May 26, 2000
First Named Inventor	Gellman et al.
Group Art Unit	3731
Examiner Name	U. Ho
Attorney Docket No.	BSC-035CN
Patent No.	Not applicable
Issue Date	Not applicable

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JUN 16 2003
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ENCLOSURES (check all that apply)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Check Attached
<input type="checkbox"/> Copy of Fee Transmittal Form
<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]
<input type="checkbox"/> Petition for Extension of Time
<input checked="" type="checkbox"/> Second Supplemental Information Disclosure Statement
<input checked="" type="checkbox"/> Form PTO-1449
<input checked="" type="checkbox"/> Copies of IDS Citations (A175-A177)
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application
<input type="checkbox"/> Formal Drawing(s)
<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal
<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> CD(s) for large table or computer program
<input type="checkbox"/> Amendment After Allowance
<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Return Receipt Postcard
<input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
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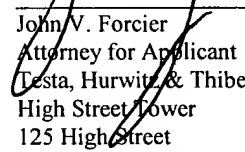
CORRESPONDENCE ADDRESS

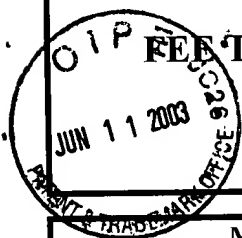
Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
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Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

SIGNATURE BLOCK

Date: June 9, 2003
Reg. No. 42,545
Tel. No.: (617) 248-7675
Fax No.: (617) 248-7100

Respectfully submitted,


John V. Forcier
Attorney for Applicant
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110



FEE TRANSMITTAL
FY 2003

Complete if Known	
Application Serial Number	09/579,909
Filing Date	May 26, 2000
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METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																					
<p>1. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p>2. <input type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input type="checkbox"/> Overpayment Credit.</p> <p>3. <input type="checkbox"/> Applicant claims small entity status.</p>				<p>3. ADDITIONAL FEES</p> <table border="1"><thead><tr><th>Large Entity Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr><tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>410</td><td>205</td><td>Extension for reply within second month</td><td></td></tr><tr><td>930</td><td>465</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1450</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1970</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>320</td><td>160</td><td>Notice of Appeal</td><td></td></tr><tr><td>320</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>280</td><td>140</td><td>Request for oral hearing</td><td></td></tr><tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td>180.00</td></tr><tr><td>750</td><td>375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>750</td><td>375</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr></tbody></table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		410	205	Extension for reply within second month		930	465	Extension for reply within third month		1450	725	Extension for reply within fourth month		1970	985	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement	180.00	750	375	Filing a submission after final rejection (37 CFR 1.129(a))		750	375	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify)				Other fee (Specify)					
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<p>CORRESPONDENCE ADDRESS</p> <p>Direct all correspondence to:</p> <p>Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100</p>				<p>SIGNATURE BLOCK</p> <p>Respectfully submitted,</p> <p>Date: June 9, 2003 Reg. No.: 42,545 Tel. No.: (617) 248-7675 Fax No.: (617) 248-7100</p> <p>John V. Forcier Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110</p>																																																																																					